

Couples HIV Counseling and Testing

Module Two: Introduction to Couples Counseling Skills

Module Perspective:

This module will focus on couples counseling skills. Participants will learn five essential skills and attributes needed when working with couples. Participants will learn how personal issues can potentially influence their ability to provide high-quality services to couples and how their own self-awareness can help in the couples counseling session. Participants will be given the opportunity to explore their own self-awareness issues in a small group exercise.

This module will also include guidance on building alliances with couples. Participants will learn how alliances serve as the foundation that permits the couple to engage in the couples HIV counseling and testing (CHCT) session. Participants will learn mediating skills, specifically to mitigate tension and avert blame, and will take part in a small group exercise to practice how they would use these skills. The trainer will review a solution-focused model of couples counseling.

After a break, participants will practice counseling skills in a family planning exercise before adjourning for the day.

Objectives for Module Two:

- Discuss counseling skills specific to working with couples HIV counseling and testing.
- Understand how a counselor's personal issues potentially can influence his or her ability to provide high-quality services to couples.
- Learn about the importance of building alliances during a CHCT session.
- Develop mediation skills to ease tension and diffuse blame during the CHCT session.

Advance Preparation

- **Prepare Newsprint:** Basic Counseling Skills (Page 4)
- **Prepare Overheads** 2-1 through 2-17
 - 2-1: Essential Skills and Attributes of the Couples Counselor
 - 2-2: The Importance of Counselor Self-Awareness
 - 2-3: The Importance of Counselor Self-Awareness (Continued)
 - 2-4: Other Issues That May Influence the Counselor's Ability to Provide Quality Services to Couples
 - 2-5: Other Issues That May Influence the Counselor's Ability to Provide Quality Services to Couples (Continued)
 - 2-6: Additional Couples Counseling Skills
 - 2-7: Additional Couples Counseling Skills (Continued)

2-8: Forming an Alliance between the Counselor and Couple
2-9: Essential Alliances in Couples Counseling
2-10: Forming an alliance is as much of an attitude as it is a technique
2-11: Directing Communication in Couples Counseling
2-12: Mediation Skills to Ease Tension and Diffuse Blame
2-13: Mediation Skills (Continued)
2-14: Mediation Skills (Continued)
2-15: Mediation Skills (Continued)
2-16: A Solution-Focused Model of Couples Counseling
2-17: A Solution-Focused Model of Couples Counseling (Continued)

- ***Make Copies of Handouts***
 - Gender Issues Briefing Paper
 - Mediation Skills Handouts (for Group 1, Group 2, and Group 3)
 - Role Play Instructions (for Both Counselors and Couples)

Day One

Module 2: Topics/Activities Schedule

Start time: 11:30 am

Activity	Time
Basic Couples Counseling Skills	10 minutes
Essential Skills and Attributes of the Couples Counselor	15 minutes
Self-Awareness Exercise	30 minutes
Other Issues That May Influence the Counselor's Ability to Provide Quality Services to Couples	15 minutes
Lunch Break	60 minutes
Couples Counseling Skills (Continued)	30 minutes
Forming Alliances	20 minutes
Directing Communication	20 minutes
Mediation Skills for Easing Tension and Diffusing Blame (Exercise)	40 minutes
Solution-Focused Model of Couples Counseling	10 minutes
Afternoon Break	20 minutes
Family Planning Exercise	50 minutes
Wrap Up/Adjourn for the Day	5 minutes

End time: 4:55 pm

Basic Counseling Skills

Define Basic Counseling Concepts

Let the participants know that you will spend the rest of today discussing skills and strategies for effective couples counseling sessions. You will end the day with a role play allowing participants to practice these skills.

Before we begin discussing the procedure of a couples HIV counseling and testing, or CHCT, session, it's important to understand the many factors that make CHCT sessions effective. Therefore, we will spend the rest of today discussing counseling skills and strategies for creating positive and interactive counseling environments. For instance, counselors must be aware of their own personal issues and how these could affect the way they interact with a couple. This is called **self-awareness**, and we will discuss it in detail. This module also includes guidance on **forming alliances** with couples. These alliances are the foundation that permits the couple to engage in the CHCT session and allows the counselor to effectively interact with the couple.

We will discuss several other skills and attributes specific to couples HIV counseling and testing. At the end of today we will have a chance to practice these skills in a role play.

Everyone here should be familiar with basic counseling skills. Couples HIV counseling and testing requires these skills as well as special skills and approaches specifically adapted to working with couples.

Display Newsprint Sheet: Basic Counseling Skills.

Basic Counseling Skills:

- Attending
- Open-ended and probing questions
- Empathizing
- Paraphrasing
- Reflective listening

Let us begin by reviewing some basic counseling skills that are necessary in any type of counseling situation. They include:

- Attending
- Open-ended and probing questions
- Empathizing
- Paraphrasing
- Reflective listening

Let's briefly define each of these words or give examples of how they might be used in a counseling situation. Who would like to try the first one, "attending"?

Have the participants define these terms and share examples where appropriate. Be sure the points listed in the definitions below are mentioned.

Attending—

Attending is the use of physical behaviors such as smiling, leaning forward, making eye contact, gesturing, and nodding to convey to clients that the counselor is interested in and open to them.

Open-ended and probing questions—

Open-ended and probing questions invite more than one or two word responses. The questions can be used to gather information, increase clarity, stimulate thinking, or create discussion.

For example, "What brought you to our site today?" is an open-ended question.

Empathizing—

Empathizing is placing yourself in the client's situation while remaining objective. Empathy requires the counselor to be nonjudgmental, sensitive, and understanding.

Paraphrasing—

Paraphrasing takes what the client has said and restates it in a nonjudgmental way. Paraphrasing helps the client to know that the counselor is aware of his or her perspective and has heard what has been said. Paraphrasing also corrects any misunderstanding between client and counselor.

Reflective listening—

Reflective listening involves repeating what a client has said, paraphrasing, displaying empathy, and reflecting back verbal and nonverbal feelings. Statements such as, “so you feel...” or “it sounds like you...” ensure the counselor understands what the client is saying.

After the participants have gone through the definitions, let them know that this information can be found in their manuals.

(Source: Gladding 2000)

Essential Skills and Attributes of the Couples Counselor

Review Essentials Of Couple Counseling

Display Overhead 2-1.

Essential Skills and Attributes of the Couple Counselor

- 1) Counselor self-awareness
- 2) Capacity to tolerate intensity
- 3) Ability both to validate and to challenge
- 4) Recognition that relationships are full of contradictions
- 5) Understanding relationships in the context of cultural values and norms and dynamics of power and oppression
- 6) Perceptions and concerns about difficulties and challenges of CHCT

Overhead 2-1

Ask for volunteers to read the following skills. They are listed in their Participant's Manual.

As you go over each of these skills, be sure that the participants have a reasonable understanding of each one. You may want to stop and discuss each point after the definition is read (using the script provided), or you may want to discuss them all together after every definition has been read through.

(Adapted from: Hardy 2002)

The basic skills that we just reviewed are appropriate for any type of counseling situation. Couples counseling requires additional skills. We will review five essential skills and attributes couples counselors need in order to work successfully with couples.

1) Counselor self-awareness

Counselors should be aware of their own beliefs, biases, feelings, perceptions, and reactions and how their perspective may affect the counseling session.

The counselor who is in tune with personal attitudes, biases, and emotions has the ability to gauge his or her responses to the couple. Self-awareness also allows the counselor to provide unbiased empathy, understanding, and support. We will discuss this important issue of self-awareness in detail.

2) Capacity to tolerate intensity

Couple relationships are dynamic and complex, and HIV-related issues may be emotionally intense. The counselor must be able to tolerate this intensity while maintaining a consistent and supportive stance. The counselor must be able to facilitate conversation and encourage the couple to deal with challenging issues. The couple's confidence in the counselor's ability to manage the session enhances their ability to relate to and deal with important issues.

In both individual and couples counseling, the counselor must be able to tolerate strong emotions and feelings. However, in CHCT, the situation is more dynamic and complex because the counselor is dealing with two individuals who have a relationship with each other.

A counselor's capacity to tolerate intensity is a skill often acquired over time and with experience and maturity.

3) Ability both to validate and to challenge

The counselor must have the ability to validate the couple's feelings and perceptions. At the same time, the counselor must challenge the couple to address the realities of HIV in their lives and their community. The counselor must also encourage the couple to take action to reduce the transmission of HIV.

For example, a couple may initially tell the counselor that they will not use condoms for a variety of reasons. However upon receiving a discordant result they may tell the counselor they will begin using condoms as a way to prevent infecting the HIV-negative partner.

The counselor should validate such a response to support the couple in making the behavior change. At the same time, the counselor should address or challenge the couple's reasons for not using condoms in the past.

In this scenario a counselor would validate the use of condoms as a prevention method while challenging the couple to address potential barriers to using condoms.

4) Recognition that relationships are full of contradictions

The couples counselor must understand the couple's strengths and weaknesses. For example, the counselor should acknowledge the couple's wish to preserve the relationship even while they struggle to accept the behavior changes required to protect each other. Engaging in behaviors that increase the risk of HIV transmission may be both pleasurable and painful.

5) Understanding relationships in the context of cultural values and norms

Culture, gender dynamics, religious background, and economic status shape couple relationships. The counselor must understand and recognize that these dynamics exist while respectfully engaging both partners in the session and valuing equality and human dignity.

6) Understanding perceptions and concerns about the difficulties and challenges of working with CHCT.

Counselors may imagine consequences for the couples that are far worse than the reality of how couples handle HIV results and disclosure.

For example, research shows that:

- In general, disclosure has not been associated with the break-up of marriages. (*Sources: Maman 2003, Kamenga 1991, Nebie 2001*)
- About 13% of discordant couples may initially experience psychological distress. (*Source: Kamenga 1991*)
- Less than 5% of stable couples separate or divorce after disclosure of an HIV positive test result. Among these couples, in most instances, follow-up counseling services can ease tension, diffuse blame, and promote reconciliation. (*Sources: Maman 2003, Kamenga 1991, Nebie 2001*)
- Less than 5% of stable couples experience violence as a result of receiving CHCT services together.

Although we do not have time to go over this topic in detail, this information tells us that the majority of partners are able to cope and deal with each other supportively after learning their HIV test results.

**Briefing Paper:
Gender Issues**

Let the participants know that you are distributing a briefing paper with additional information on gender issues related to CHCT. This information is for them to review outside of the training.

I am distributing a briefing paper that will give you additional information about gender issues related to couples HIV counseling and testing. Please review this handout on your own time.

Are there any questions?

Now that we've had an introduction to five essential CHCT skills (*and one attribute*), you will work in small groups on an exercise that focuses particularly on counselor self-awareness. This exercise will help you identify and consider ways in which personal issues can influence a counselor's ability to work effectively with a couple.

Self-Awareness Exercise

General Instructions for the Exercise

This exercise will introduce participants to the importance of counselor self-awareness.

Separate the participants into three groups. You may want to divide them by counting them off (1,2,3,4,5, 1,2,3,4,5, etc.) or by asking them to form groups with people they have not talked to yet.

Ask the participants to turn to the questions for self-awareness in Module Two in their manuals. Instruct each small group to reflect upon and discuss the questions regarding counselor self-awareness. Afterwards, a volunteer from each group will share the main issues their group discussed.

Be sure to clarify any questions the participants have before they begin.

Allow the small groups to have 15 minutes to discuss. Let them know when they only have 5 minutes remaining.

Ask for a volunteer from each group to share some of the issues that they discussed. Be sure they answer the following questions:

- *How can the self-awareness issues you identified influence how you interact with clients?*
- *How can you prevent these issues from negatively influencing your counseling sessions?*

Thank the groups for their participation.

Debriefing the Self-Awareness Exercise

Display Overhead 2-2. It can be found in the Participant's Manual.

**The Importance of Counselor
Self-Awareness**

Being self-aware allows counselors to:

- Provide high quality services to couples
- Ensure that personal values, beliefs, and experiences do not influence interaction with couple
- Reduce the potential for biasing the couple's decisions
- Understand that he or she is not responsible for the test results or the couple's relationship

Overhead 2-2

As we discussed, counselor self-awareness is a general term that refers to the ability to understand how personal beliefs and

experiences affect how a counselor reacts and responds in a counseling session.

Personal biases can influence a counselor's ability to provide high-quality services to couples. Counselors regularly need to examine their own issues and improve their counseling skills to prevent their personal biases from interfering with their counseling sessions. This understanding is crucial for providing the highest quality of services to couples.

Having high self-awareness allows counselors to:

- Provide high-quality services to all couples.

For example:

A counselor who is self-aware is less likely to try to bias the couple's decisions. Instead, he or she provides the necessary information for the couple to make an informed decision.

- Ensure that their values, beliefs, and experiences do not influence their interaction with couples. In other words, self-awareness helps the counselor remain nonjudgmental.
- Reduce the potential for biasing the couple's decisions.

For example:

A counselor who is self-aware will ensure that regardless of personal beliefs, he or she will provide the couple with all of the necessary information for them to make an informed decision.

- Understand that he or she is not responsible for the test results or the couple relationship.

Display Overhead 2-3 and continue discussion.

**The Importance of Counselor
Self-Awareness (continued)**

Being self-aware allows counselors to:

- Hear and understand the couple's concerns
- Offer genuine empathy and support
- Skillfully and effectively manage the couple counseling session
- Empower the couple

Overhead 2-3

- Hear and understand the couple's concerns.
- Offer genuine empathy and support.
- Skillfully and effectively manage the couples counseling session.
- Consequently, through self-awareness, counselors are able to focus unbiased attention on the couple and effectively engage and empower them.

Other Issues That May Influence the Counselor's Ability to Provide Quality Services to Couples

Display Overhead 2-4.

Other Issues That May Influence the Counselor's Ability to Provide Quality Services to Couples

- Counselor's experiences, values, and feelings relating to couple relationships, including gender roles and expectations
- Dreams and aspirations counselor has for his or her own relationship, family, and future
- Counselor's relationship with his or her partner

Overhead 2-4

Introduce Other Issues That Can Affect Quality of Services

Counselors need to be aware of other issues when working with couples. Many of these issues are related to counselor self-awareness.

Issues that may influence the counselor's ability to provide high-quality services to couples include:

- Counselor's experience, values, and feelings relating to couple relationships, including gender roles and expectations

For example:

A counselor who may have had difficulties with his or her own partner and is not self-aware may allow personal feelings to influence how he or she treats all members of the opposite sex, even within a couples counseling setting.

- Dreams and aspirations the counselor has for his or her relationship, family, and future.

For example:

A counselor who is not self-aware may impose personal feelings about a concordant positive or discordant result onto the couple, by thinking of his or her own family and dreams. However, the couple's reaction to their test results may be different from that of the counselor.

- Counselor's relationship with his or her partner

For example:

A counselor may speak frankly and openly with his or her own partner about risk for HIV and may therefore expect the couple to behave the same way.

Display Overhead 2-5 and continue discussion.

**Other Issues that May Influence the
Counselor's Ability to Provide
Quality Services to Couples (Continued)**

- Counselor's experience receiving individual HIV counseling and testing services
- Counselor's willingness to receive couple HIV counseling and testing services
- Counselor's feelings about whether or not to disclose HIV test result to partner
- Partner's reaction if counselor did disclose and the impact on the relationship

Overhead 2-5

- Counselor's experience receiving individual HIV counseling and testing services

For example:

A counselor who had a bad experience when receiving counseling and testing services may expect the couple to have a bad experience as well.

- Counselor's willingness to receive couples HIV counseling and testing services

For example:

A counselor who feels uncomfortable about getting tested for HIV with his or her own partner may then not value the couple's decision to receive counseling and testing together.

- Counselor's feelings about whether or not to disclose his or her HIV test result to partner.

For example:

A counselor who is uncomfortable with disclosing his or her HIV status and is not self-aware may project personal insecurities about disclosure onto the couple.

- Partner's reaction if counselor did disclose and the impact on their relationship

For example:

Counselors who have had bad experiences with disclosure to their partner and who are not self-aware may speak of disclosure unfavorably with the couple or may assume that the couple will react poorly to their test results.

We will have a chance to discuss these issues more over the next few days.

Are there any questions before we break for lunch?

Answer or clarify as needed.

Lunch Break

Confirm with participants the time they should return from lunch.

Couples Counseling Skills (Continued)

After welcoming the group back from lunch, you may want to conduct a short energizer to regain the participants' focus and energy. You may also want to review briefly the material you have covered so far that day.

Welcome back. So far today we have discussed:

- An introduction to this training and CHCT
- Advantages of couples counseling
- Basic counseling skills
- Essential skills and attributes of the couples HIV counselor
- How counselor self-awareness assists with counseling couples

Next we are going to review several more counseling skills specifically for working with couples.

Display Overhead 2-6, then 2-7. These can be found in the Participant's Manual.

Additional Couple Counseling Skills

- Demonstrate neutrality and non-biased concern for both members of the couple.
- Convey respect for the couple's relationship.
- Facilitate balanced participation of both partners.

Overhead 2-6

**Additional Couple Counseling Skills
(Continued)**

- Model appropriate listening and communication skills.
- Facilitate dialogue between the couple.
- Raise the difficult issues that the couple may need to address.
- Ease tension and diffuse blame.

Overhead 2-7

The following counseling skills will help maintain a positive atmosphere and balanced couple interactions during the CHCT session.

- Demonstrate balanced and equal concern for both members of the couple.
- Convey respect for the couple's relationship.
- Facilitate balanced participation of both partners during the session.
- Model appropriate listening and communication skills.
- Facilitate dialogue between the couple.
- Raise difficult issues that the couple may need to address.
- Ease tension and diffuse blame.

We will also practice these skills over the next few days, beginning with a role play later today.

By remaining neutral, conveying respect for the couple's relationship, and facilitating balanced participation by each partner, the counselor helps to build and sustain an important and trusting alliance with the couple.

Before we begin discussing the importance of this alliance, are there any questions about these couples counseling skills?

Answer questions and acknowledge any comments.

Forming Alliances

Display Overhead 2-8.

Forming an Alliance between the Counselor and Couple

A.C.E.

- 1) Acknowledgment
- 2) Competence
- 3) Empathy

Overhead 2-8

Define Alliance

When a counselor begins working with a couple, the counselor's first task is to form an alliance with the couple.

What do you think the term "alliance" means?

Listen for:

- ***An alliance is a partnership between the counselor and the couple.***

Acknowledge responses.

The alliance is the foundation that permits the couple to:

- Engage in the session
- Explore issues
- Disclose and address challenging HIV-related issues

Strategies for Forming Alliances

Let's discuss some ways you can begin forming an alliance.

The acronym, A.C.E., explains three important steps to building an alliance:

- 1. Acknowledgement**—Describes the couple's awareness that the counselor acknowledges their strengths, courage, and experience.

Recognizing Important Alliances

2. Competence—The couple senses that the counselor has the skills and experience to guide and support them through the CHCT process.

3. Empathy—The couple senses that the counselor genuinely understands and appreciates their experiences and feelings.

Can you name a few ways to form or build an alliance when working with a couple in a CHCT session?

Acknowledge responses.

Some suggestions may include:

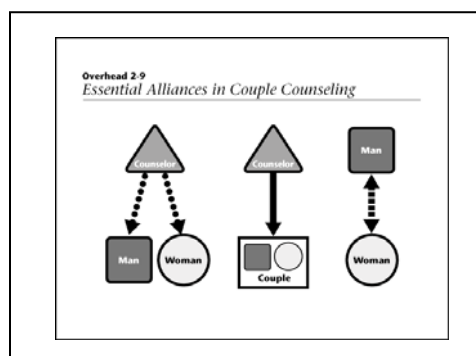
- *Offer genuine warmth, kindness, and compassion.*
- *Respect the couple and where they are coming from emotionally and culturally.*
- *Give each person a chance to speak, and listen to responses.*
- *Use appropriate body language (such as smiling and nodding) to convey warmth and understanding.*

(Adapted from: Keim 2002)

In couples counseling, there are actually four important alliances that the counselor needs to establish, foster, and maintain. Who do you think is involved in each of the four alliances?

Acknowledge responses.

Display Overhead 2-9.



The four important alliances are:

1 and 2. The **first two** alliances are between the counselor and each of the individuals.

3. The next alliance is between the counselor and the couple as a collective unit representing more than two individuals (for example, the family unit, the community, and society).

4. The fourth alliance is between the couple as partners.

Now let us go over these alliances in detail.

1 and 2. Counselor and each individual

In the first two alliances, each partner should feel acknowledged, valued, respected, engaged, and empathetically understood. The counselor should convey genuine interest and investment in each individual.

3. Counselor and couple

In the alliance between the counselor and the couple as a unit, the counselor should convey respect for the couple's relationship. The counselor should recognize the bond between the members of the couple and validate their mutual commitment. The couple should feel that the counselor values their relationship.

4. Individuals in the couple

In the alliance between the couple as partners, the counselor should encourage the couple to speak to and engage each other. The counselor should help the couple recognize their shared values, mutual history, and future aspirations. The counselor should recognize that the strength and resilience of the couple's alliance influence how they will deal with challenges and build their future together.

The more the couple can be supported in addressing their issues and concerns as partners—in terms of “we” rather than as individuals—the more likely they will be able to cope with the realities of HIV in their shared life.

Alliance as Attitude

Display Overhead 2-10.

**Forming an alliance is
as much of an attitude
as it is a technique.**

Overhead 2-10

An important thing for counselors to remember is that building an alliance with a couple **is as much of an attitude as it is a technique.**

What do you think this means?

Listen for:

- *An alliance is formed through both verbal and nonverbal communication. It is the manner in which you engage a couple that helps them to trust, respect, and open up to you.*

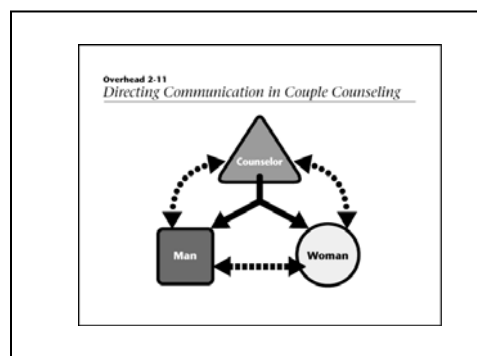
Acknowledge responses.

Directing Communication

Now let us take a look at how counselors can direct communication during couples HIV counseling.

The counselor should pay a great deal of attention to the paths of communication during the session, including communication from the counselor to the couple, the counselor to each individual, and each partner to the other.

Display Overhead 2-11. This can be found in the Participant's Manual.



Ask for volunteers to read from the Participant's Manual: Directing Communication in Couples Counseling. Read first the solid arrow, then the dashed arrow, and then the dotted arrow. Stop after each one, and use the script and Overhead 2-11 to explain the communication techniques mentioned and the importance of each.

Will someone volunteer to read from your manuals what the solid arrow in this diagram means?

Solid Arrow—communication between the counselor and the couple as a unit

By directing conversation to the couple, the counselor recognizes the couple as a unit. The couple has a shared history and shared dreams for the future. The counselor invites the couple to share their perspectives on issues and to think about their life together. This builds the counselor's working alliance with the couple. It emphasizes and affirms the couple relationship.

- An example of communicating with the couple as a unit is, “How did the two of you decide to come here today?”

Will someone volunteer to read from your manuals what the dashed arrow means?

Dashed Arrow—communication between the male partner and the female partner

By directing the couple to speak to each other, the counselor facilitates conversations between the couple. The counselor encourages the couple to work as a team and to bring their expertise about their shared life and their strengths into the process. This strengthens the couple’s alliance; builds communication skills; and facilitates dialogue, cooperation, and mutual decision-making.

- An example would be to ask, “How do you think the two of you would want to tell your families if either or both of you were HIV-positive?”

Will someone volunteer to read from your manuals what the dotted arrow means?

Dotted Arrow—communication between the counselor and the partners as individuals

It’s important for the counselor to engage in conversation with each member of the couple. This allows each person to share his or her perspective on issues and also enhances the ability of the silent partner to listen to his or her partner. This process models respectful consideration of each individual’s feelings, concerns, and issues.

- Questions that may help both partners open up during the counseling session revolve around topics that are easy to answer but are important to the relationship. “Tell me about your family and how many children you have” is an example.

Looking back on this morning’s ice breaker, how did you communicate when you could not use words?

Acknowledge responses.

Reinforce that directing communication occurs on many levels, including:

- ***Eye contact***
- ***Body language***

- ***Nonverbal reinforcement***
- ***Dialogue***

In the CHCT session, the counselor should strive to model and encourage respectful interactions and balanced participation of both partners.

What does modeling effective communication involve?

Listen for:

- ***The counselor serves as a communication role model for the couple.***
- ***The counselor demonstrates ways to communicate effectively and respectfully. Throughout the session, the couple observes the counselor.***
- ***The couple is given the opportunity to practice essential communication skills they will need to contend with HIV issues.***

Acknowledge responses.

Mediation Skills for Easing Tension and Diffusing Blame

Explore Mediation Skills

Introduce mediation skills.

Another important skill of a CHCT counselor is the ability to ease tension and diffuse blame between the couple. The following mediation skills will help do this.

Go through Overheads 2-12 to 2-15.

Ask for volunteers to read the following suggestions from the overhead for easing tension and diffusing blame. Then use the script to go into detail about each technique.

Mediation Skills for Easing Tension and Diffusing Blame

- 1) Normalize feelings, reactions, and experiences.
- 2) Effectively use silence while conveying a supportive and calm demeanor.
- 3) Remind the couple that HIV infection is common.

Overhead 2-12

Can we have a few volunteers to read the following suggestions from the overhead for easing tension and diffusing blame during a CHCT session?

1. Normalize feelings, reactions, and experiences. Help the couple to recognize that their feelings are common and that many others have had similar experiences.

2. Effectively use silence while conveying a supportive and calm demeanor. Allow the couple a period of silence so they can collect their thoughts and respond or comment accordingly.

Many counselors are uncomfortable with silence or pauses in the conversation. What experience have any of you had with using silence? How effective was your use of silence?

Acknowledge responses. Add that effectively using silence allows couples and individuals to reflect on what is being discussed and to respond or comment accordingly.

3. Remind the couple that HIV infection is common. An individual may have been infected at any time.

**Mediation Skills for Easing Tension
and Diffusing Blame (Continued)**

- 4) Focus on the present and future. The past cannot be changed.
- 5) Avoid and deflect questions aimed at identifying the source of infection.
- 6) Express confidence in the couple's ability to deal with HIV-related issues.

Overhead 2-13

4. Focus on the present and future. Reinforce that the couples HIV counseling and testing session focuses on the couple's present and future. The past is in the past and cannot be changed.

5. Avoid and deflect questions that aim at identifying the potential source of infection. It is not possible and probably not helpful to determine when and by whom someone was infected with HIV. The reality is that the HIV virus is present and knowing where it came from cannot change this reality. Discussion about the source of the infection is neither helpful nor relevant to the couple's present situation. Trainers should refer participants back to the counseling concepts reviewed in Module One.

6. Express confidence in the couple's ability to deal with HIV-related issues. Reflect on their strengths and history together and how they have effectively addressed challenges in their shared lives.

**Mediation Skills for Easing Tension
and Diffusing Blame (Continued)**

- 7) Admire the couple's willingness to contend with the challenges of HIV in their lives.
- 8) Acknowledge the feelings expressed or observed. Predict that in time their intensity will likely change and shift.
- 9) Redirect and reframe questions and discussions that are blaming or potentially hostile. Identify underlying non-hostile feelings, such as fear or anxiety.

Overhead 2-14

7. Admire the couple's willingness to contend with the challenges of HIV in their lives.

8. Acknowledge the feelings expressed and observed. Predict that in time their intense emotions will likely change or shift. Recognize the feelings expressed during the session. Let the couple know that the intense emotions will lessen over time and they will begin to adapt and cope.

9. Redirect and reframe questions and discussions that are blaming or potentially hostile. Identify underlying non-hostile feelings. Fear, anxiety, and uncertainty may be expressed as anger, aggression, or hostility. Help the partners to identify their underlying emotions.

For example:

After a long, busy day, you are walking home with your young child. You stop to speak briefly to a friend. While you are talking, your child starts to run across the busy road. You grab him and harshly scold him.

What are you really feeling? Are you really angry with your child?

If your friend says to you, "You're a terrible parent. Don't speak to your child that way." How would you feel?

If instead your friend says, "You look tired. Don't be upset that you looked away from your child. You must have felt so frightened he could have been hurt." How would you feel?

Acknowledge responses.

**Mediation Skills for Easing Tension
and Diffusing Blame (Continued)**

- 10) Calmly and gently name and acknowledge the behavior being observed
- 11) Remind the couple of their roles and responsibilities outlined at the beginning of the CHCT session.

Overhead 2-15

**Practice
Mediation Skills**

10. Calmly and gently name and acknowledge the behavior being observed. Naming the behavior you observe can help the partners place their feelings and emotions into perspective. For example, a counselor could say “It seems as though this is a difficult issue for you. Could you help me figure out how we might talk about it in a way that would be helpful to you?” Or, a counselor could name the behavior by saying, “I understand that you may be feeling disappointed and upset.” Both approaches can help the partners address the feelings and emotions behind their behaviors.

11. Remind both members of the couple of their roles, responsibilities, and expectations outlined at the beginning of the session. This is something we will discuss tomorrow.

Before we move on, let’s do a brief small group exercise to give you an opportunity to practice specific ways to use mediation skills to ease tension and diffuse blame during a CHCT session.

For this exercise, divide the participants into three groups. You may choose to break the class into groups in a creative way. Or, you could number them off or have them work with people they have not talked with yet. Each group will be given a different handout. The handouts identify three specific mediation techniques from the list just discussed. Ask each group to come up with one or two examples of the words they would use to communicate their assigned mediation techniques to a couple in a CHCT session. For instance, what could a counselor say to a couple to normalize feelings, reactions, and experiences? Participants should be instructed to not use their manuals in this exercise.

After 15 minutes, each group will present their examples to the rest of the class. Possible responses are listed in this manual to help the trainer guide the participants in their responses, if necessary. While the participants may not use the same wording as the examples here, their responses should be similar. Participants can take notes in their manuals when reporting back to the larger group.

This exercise will help you understand and practice ways in which these mediation skills can be used.

You will be working in three separate groups.

I will give each group three skills from the list we just discussed. Each group will have 15 minutes to write out one to two

Examples

sentence examples of how a counselor would express these skills in words to a couple in a CHCT session.

Please only take your handouts with you in your small groups.

After 15 minutes, we will regroup and share our examples of statements that accomplish each mediation technique.

Are there any questions?

Answer any questions.

Distribute the following Handouts:

Handout 2-2 to the first group

Handout 2-3 to the second group

Handout 2-4 to the third group

Let the groups know when only a few minutes remain. Call time after 15 minutes, and ask one representative from each group to present their group's work to the class.

Be sure to thank each group for its work before you move on to the next topic.

The following examples will guide the trainer in responding to the participants' ideas as the groups present their work. The examples should not be shared until the participants complete the exercise. The participants may come up with different examples than those listed here, but the general ideas should be the same.

Group 1

Normalize feelings, reactions, and experiences.

Ways to communicate this:

- "I have heard other couples express similar feelings in this situation."
- "Many couples share the same concerns."
- "You are not alone. Couples frequently deal with these issues."
- "Your concerns are understandable and reasonable. There is a lot for you to deal with."

Avoid and deflect questions aimed at identifying the potential source of infection.

Ways to communicate this:

- "It is not possible and probably not helpful to determine when and by whom someone was infected with HIV."
- "The reality is that the HIV virus is present. Knowing where it came from cannot change that."

- “HIV infection could have occurred at any time after you became sexually active.”

Acknowledge the feelings expressed or observed and predict that in time their intensity will likely change and shift.

Ways to communicate this:

- “It seems many couples have the same initial reaction as you have, but I find that over time this gradually changes, and they adjust.”
- “Feeling distressed and a sense of loss is normal. Gradually, however, you will be able to adjust and cope.”
- “This may feel a bit consuming right now, but in time, these feelings usually diminish and life begins to feel almost normal again.”
- “I hope you can trust me when I say that with time this will be easier for you to deal with.”

Group 2

Remind the couple that HIV infection is common. One may have been infected at any time. Absence of infection is simply good fortune.

Ways to communicate this:

- “Most everyone in our community has someone close to them who has been infected with HIV.”

Express confidence in the couple’s ability to constructively deal with HIV-related issues. Reflect on their strengths and their history together.

Ways to communicate this:

- “You seem to be a supportive couple.”
- “It sounds like you have weathered some difficult and challenging times together, and your ability to do that should help you now.”
- “Sometimes dealing with these challenges can make your partnership stronger.”
- “Together you have created a family and provided for your loved ones. Together, I believe, you will have the strength needed to deal with these issues.”
- “From what I have seen of your mutual commitment, I trust you will be able to deal with these issues.”

Redirect and reframe questions and discussion that is blaming or potentially hostile. Identify underlying feelings that might be causing these negative reactions, such as fear, anxiety, uncertainty, and concern.

Ways to communicate this:

- “Could you share with me what has you the most worried?”
- “Would it help if we talked about what you are feeling?”
- “It is sometimes easier to express frustration and anger than to discuss your fears.”

Group 3

Focus on the present and future.

Ways to communicate this:

- “It would be best if we could focus on your situation now and how to help you cope and adapt.”
- “Almost everyone has a past, and it is best left there. The past cannot be changed.”
- “Let’s look at what you can do now and in the future to address these issues.”

Admire the couple’s willingness to confront the HIV-related issues in their lives.

Ways to communicate this:

- “I recognize that this may be difficult, and I admire your willingness to deal with these issues.”
- “HIV is an issue that concerns many couples, and you have chosen to deal with this issue together.”

Calmly and gently name and acknowledge the behavior being observed.

Ways to communicate this:

- “I understand that you might be feeling disappointed and upset.”
- “It seems as though this is a difficult issue for you. Could you help me figure out how we might talk about it in a way that would be helpful to you?”

At the end of the exercise direct participants to their manuals, where they will find several examples of these mediation techniques. When participants return to their sites, these examples can serve as a reference to assist them in building their mediation skills for easing tension and diffusing blame. This is an important skill and requires practice to be used effectively.

Solution-Focused Model of Couples Counseling

Introduce and Discuss Concepts of Solution-Focused Model

Go through Overheads 2-16 and 2-17. Use the script to explain each point. This information can be found in the Participant's Manual. (Adapted from: Brown 2001)

Display Overhead 2-16.

A Solution-Focused Model for Couple HIV Counseling

- Effectively delivered, brief couple interventions make a difference.
- Couples who volunteer for CHCT are invested in the process.
- It is the couple's present and future that are the most important.
- It is most effective to build on strengths rather than weaknesses.

Overhead 2-16

Now we are going to take a look at a solution-focused model of couples counseling.

This model emphasizes the approach to couples HIV counseling that we will focus on in this training.

- **Effectively delivered, brief couples interventions make a difference.**
- **Couples who volunteer for CHCT are invested in the process.**

Most couples constructively engage in the CHCT session. Generally, couples who request CHCT services have identified HIV as an issue of concern and have decided to deal with it together. The couple has entrusted the counselor to skillfully guide and support them throughout the process.

- **It is the couple's present and future that are the most important.**

Why is it important to focus on the present and future in a CHCT session?

Acknowledge responses, such as:

- ***The past cannot be changed.***
- ***In high prevalence countries, anyone could have become infected.***

Remember that the CHCT process **is not** about blame or identifying the behavior or the individual that is the source of the infection. It **is** about helping the couple to address the realities of HIV in their shared life. It **is** about the present and helping them to deal with the reality of HIV in their lives and to prepare for their future.

This is an extremely important difference between CHCT and individual counseling and testing. Individual counseling may look at past behaviors and possible sources of infection, but CHCT does not.

A helpful way to think about this is the analogy of a snake in the house. It does not matter how the snake got into the house—front door, back door, or roof; what matters is that the snake is in the house and needs to be dealt with. By focusing on solutions, CHCT helps couples move on with their lives and make positive attitude and behavior changes.

- **It is most effective to build on strengths rather than on weaknesses.**

Why is it important to build on strengths rather than focusing on weaknesses?

Acknowledge responses.

Responses may include:

- ***The couple's strengths, such as the ability to adapt, their flexibility, and their resilience, are the resources that will help them to deal effectively with HIV.***

Display Overhead 2-17.

**A Solution-Focused Model for
Couple HIV Counseling (Continued)**

- Focus on solutions instead of dwelling on problems.
- The couple understands how to use their strengths to address HIV-related issues in their relationship.
- The counselor validates feelings, but the focus is on positive actions.
- Small behavior changes can lead to bigger ones.

Overhead 2-17

- **The focus is on solutions, not problems.**
Attention and energy are best directed toward generating solutions. Help the couple to identify possibilities, options, and alternatives. The couple's skills, strengths, and resources are maximized when they are directed toward creating solutions together.
- **The couple understands how to use their strengths to address HIV-related issues in their relationship.**
In CHCT sessions, the counselor brings in expertise about HIV, behavior change, and counseling skills. The couple brings expertise about their relationship, their life together, and their strengths and resources. The couple uses their strengths and resources to address issues, and the counselor skillfully supports them through the process.
- **The counselor validates feelings, but the focus is on positive actions.**
Attending to emotions is important, but action generates hope, optimism, and confidence. The counselor should help the couple to imagine and believe in possibilities and empower them to take action.
- **Small behavior changes lead to bigger ones.**
Life is about changes. From the moment the couple decided to receive CHCT services, they realized on some level that change in their lives became inevitable. The first step toward behavior change came when the couple decided as a unit to seek counseling and testing services.

The goal of CHCT is to help the couple to build on this momentum and to initiate changes that will reduce their risk of acquiring or transmitting HIV.

Are there any questions?

After we take a 20-minute break we will wrap up this module by practicing counseling skills in a role play exercise.

**Afternoon
Break**

Confirm what time group will reconvene.

Role Play: Family Planning Exercise

Explain Role Play

Divide the participants into groups of three. If possible, include at least one male-female pair in each group—avoid using groups with all men or all women. The male-female pair will play the roles of husband and wife, and the third person will play the counselor. Distribute to each person the handout that is specific to his or her role (husband, wife, or counselor). Be sure to give each person only the information needed for his or her role. Emphasize the importance of the counselor practicing the skills discussed today and of the couple acting as described. The groups will have 30 minutes for the role play. During the role play, walk around the room to make sure the groups are covering the main points of the role play and are not getting sidetracked. Answer questions and encourage participants as necessary. Afterwards, debrief the role play using the questions provided.

Introduce the role play, and divide the participants into groups.

Welcome back. We are going to spend the rest of the afternoon reviewing the material we have covered so far in a role play. I am going to divide the class into groups of three. In each group of three, I will ask one person to act the role of the counselor and two people to act as a couple.

Distribute the following:

- *To the counselor: a checklist of important counselor characteristics*
- *To each member of the couple: background information for the characters in the role play. Be sure to give each person only the information for his or her character.*

Let the participants know that they will have 30 minutes for the exercise.

I am distributing handouts with information about the character you will be playing. Please read only the sheet I give you. After the role play, everyone will have a chance to look over all the handouts.

We are using family planning as a discussion topic. Those who are playing the role of counselor should focus on using their couples HIV counseling skills, such as forming alliances and directing communication. Those playing members of the couple should focus on playing their roles as they are written on the handouts.

Each group will have 30 minutes for the role play, and then we will have a chance for discussion. Are there any questions?

Let participants know when they have 5 minutes remaining.

After 30 minutes, debrief the exercise using the questions provided in the script.

Debrief Role Play

Debriefing Questions

Ask the participants who played the counselor:

- What skills did you practice to help you effectively conduct the session?
- What skills did you use to establish and reinforce alliances with your couple?
- What communication skills did you use?

Ask the participants who played the couples:

- How effective were your counselor's techniques?
- Did the counselor communicate with both members of the couple equally?
- Did the counselor direct communication?

Distribute character and counselor handouts to all participants to read outside of the training.

Wrap-Up

Quickly recap the material covered today and answer any questions the participants may have. Briefly introduce tomorrow's topic, and remind the participants of the starting time. Be sure to end by thanking everyone for their participation and enthusiasm.

Today's sessions served as:

- An introduction to and the advantages of CHCT
- An overview of sero-discordance
- A review of important counseling skills, such as counselor self-awareness and mediation skills

Tomorrow we will discuss the actual procedure of a CHCT session. You will have a chance to see how the counseling skills we went over today can be used when working with a

concordant negative couple. You will have a chance to practice using the CHCT intervention in a role play.

Are there any final questions?

Thank you for your participation today. See you tomorrow at [state time]. Please be on time since we have a lot to cover.

References

Gladding ST. The Counseling Dictionary: Concise Definitions of Frequently Used Terminology. Upper Saddle River, NJ: Merrill Prentice Hall, 2000.

Handouts

Module Two: Introduction to Couples Counseling Skills

Handout 2-1

Gender Issues Briefing Paper

In many countries, gender disparities and dynamics exist that may lead to power imbalances in relationships between men and women. HIV counselors need to be aware of these potential gender issues when conducting a couples HIV counseling and testing (CHCT) session. Some gender issues related to HIV are:

- Economic dependency
- Property rights and other legal issues
- Equal access to care, treatment, and support services
- Domestic violence, abandonment, or both
- Couple dynamics (e.g., husband speaks for wife, husband makes decisions about couple's sexual behavior)

Gender issues can influence the direction and the dynamics of an HIV counseling and testing session. However, it is important for counselors to keep in mind that overall very few (less than one out of six) women experience negative partner reactions when disclosing HIV test results (*Maman 2003*). The majority of women receive support and understanding from their partners when they disclose their HIV status. Also, less than 5% of couples separate or divorce after disclosure of a positive HIV test result (*Maman 2003, Kamenga 1991, Nebie 2001*).

Couples HIV counseling and testing has some gender-related advantages. One advantage is that both partners learn their status together. When tested individually, gender issues and fear may play a large role in whether a woman will disclose her HIV status to her husband or partner (*Heyward 1993, Keogh 1994*). In CHCT, a woman does not need to disclose her status because the counselor will provide the couple's test results as a unit. The CHCT session also gives the counselor an opportunity to direct communication, ease tension, and diffuse blame within the couple relationship. Couples counseling offers a safe and supportive environment in which a couple can discuss HIV risk issues and concerns, cope with their HIV test results, and begin to plan for the future of the relationship. Therefore, CHCT is an intervention that can help mediate gender issues related to HIV and prevent negative experiences associated with testing.

Ultimately, the couple is responsible for deciding the course of their relationship (for example, whether the relationship will continue or dissolve) after receiving CHCT services. However, the counselor's role is critical in helping the couple cope, be mutually supportive, and adapt to their HIV test results. In rare instances, if a counselor is concerned that a woman might be at risk for violence, the CHCT site should, at a minimum, provide her with information about appropriate crisis support services in the community.

Handout 2-2

Practice Mediation Skills: Group 1

You will have 15 minutes to write one or two sentence examples of how a counselor would express these skills in words to a couple in a CHCT session.

Normalize feelings, reactions and experiences.

Avoid and deflect questions aimed at identifying the potential source of infection.

Acknowledge the feelings expressed or observed and predict that in time their intensity will likely change and shift.

Handout 2-3

Practice Mediation Skills: Group 2

You will have 15 minutes to write one or two sentence examples of how a counselor would express these skills in words to a couple in a CHCT session.

Remind the couple that HIV infection is common. One may have been infected at any time. Absence of infection is simply good fortune.

Express confidence in the couple's ability to constructively deal with HIV-related issues. Reflect on their strengths and their history together.

Redirect and reframe questions and discussion that is blaming or potentially hostile. Identify underlying feelings that might be causing these negative reactions, such as fear, anxiety, uncertainty, and concern.

Handout 2-4

Practice Mediation Skills: Group 3

You will have 15 minutes to write one or two sentence examples of how a counselor would express these skills in words to a couple in a CHCT session.

Focus on the present and future.

Admire the couple's willingness to confront the HIV-related issues in their lives.

Calmly and gently name and acknowledge the behavior being observed.

Handout 2-5

Family Planning Role Play

Couple: Steven, age 25, and Grace, age 23

Steven and Grace met at the university and dated during their last two years of school. A few months after Steven and Grace began dating, Steven's uncle died from AIDS. His death resulted in Steven and Grace talking honestly and openly about their concerns about HIV. They agreed that they would each make appointments at the VCT site to get tested and share their results. They were both relieved to find out that they were HIV-negative. They married a couple months after graduation. They are a loving, committed, and faithful couple. Currently they use condoms to prevent pregnancy. They have come to the family planning clinic today to talk with the nurse about family planning issues.

Steven:

In school Steven studied computer technology and recently obtained a good job at a cell phone company. Since he is starting to make a fairly good living, he feels it is a good time to start a family. He is also tired of using condoms, so conceiving a baby seems like a good reason to stop using the condoms. Steven comes from a big family and would like to have at least four or five children. He thinks Grace will make a wonderful mother. He is also getting some pressure from his mother to make her a grandmother.

Handout 2-6

Family Planning Role Play

Couple: Steven, age 25, and Grace, age 23

Steven and Grace met at the university and dated during their last two years of school. A few months after Steven and Grace began dating, Steven's uncle died from AIDS. His death resulted in Steven and Grace talking honestly and openly about their concerns about HIV. They agreed that they would each make appointments at the VCT site to get tested and share their results. They were both relieved to find out that they were HIV-negative. They married a couple months after graduation. They are a loving, committed, and faithful couple. Currently they use condoms to prevent pregnancy. They have come to the family planning clinic today to talk with the nurse about family planning issues.

Grace:

In school Grace studied to be a nurse and has recently started her first nursing job at the immunization clinic. She loves her work and would like to eventually work in the hospital wards, maybe even be a matron someday. Grace wants children, but not yet. She is enjoying being a newlywed and settling into married life. Besides, she just started her career and would like to work at least two years before taking time off to have a child. In her mind it would be ideal to have two children, a boy and a girl.

Handout 2-7

Family Planning Role Play

Counselor:

1. Facilitate a discussion about the couple's plans for starting a family.
2. Encourage the couple to communicate their feelings about the various issues related to this (such as career, in-laws, and family size).
3. Help Grace and Steven understand each other's perspective.
4. Help the couple to arrive at a mutually agreed upon plan for having children.

Review Counselor Attributes for Effectively Delivering CHCT Services:

- Maintain self-awareness.
- Convey confidence and competence.
- Model effective listening and communication skills.
- Possess genuine empathy and understanding.
- Exhibit the ability to tolerate intensity.
- Recognize the couple as a unit consisting of more than two individuals.
- Understand the challenges and competing priorities faced by families and couples.
- Understand cultural values and gender dynamics.
- Value equality and human dignity.

Practice Counselor Skills for Effectively Delivering CHCT Services:

- Establish and reinforce alliances:
 - With each individual
 - With the couple as a unit
 - Between the partners in the couple
- Demonstrate neutrality and non-biased concern for and interest in both partners.
- Convey respect for the couple's relationship.
- Acknowledge the couple's shared experiences and history.
- Admire and build on the couple's strengths.
- Facilitate balanced participation of both partners.
- Direct communication:
 - To each individual
 - To the couple as a unit
 - Between the partners in the couple
- Focus on the couple's present and future.
- Validate feelings while supportively challenging the couple and emphasizing action.
- Recognize the couple's expertise and self-determination.
- Focus on solutions, not problems.
- Ease tension and diffuse blame.
- Negotiate and encourage small changes.

Overheads

Module Two: Introduction to Couples Counseling Skills

Essential Skills and Attributes of the Couple Counselor

- 1) Counselor self-awareness
- 2) Capacity to tolerate intensity
- 3) Ability both to validate and to challenge
- 4) Recognition that relationships are full of contradictions
- 5) Understanding relationships in the context of cultural values and norms and dynamics of power and oppression
- 6) Perceptions and concerns about difficulties and challenges of CHCT

Overhead 2-1

The Importance of Counselor Self-Awareness

Being self-aware allows counselors to:

- Provide high quality services to couples
- Ensure that personal values, beliefs, and experiences do not influence interaction with couple
- Reduce the potential for biasing the couple's decisions
- Understand that he or she is not responsible for the test results or the couple's relationship

Overhead 2-2

The Importance of Counselor Self-Awareness (Continued)

Being self-aware allows counselors to:

- Hear and understand the couple's concerns
- Offer genuine empathy and support
- Skillfully and effectively manage the couple counseling session
- Empower the couple

Overhead 2-3

Other Issues That May Influence the Counselor's Ability to Provide Quality Services to Couples

- Counselor's experiences, values, and feelings relating to couple relationships, including gender roles and expectations
- Dreams and aspirations counselor has for his or her own relationship, family, and future
- Counselor's relationship with his or her partner

Overhead 2-4

Other Issues That May Influence the Counselor's Ability to Provide Quality Services to Couples (Continued)

- Counselor's experience receiving individual HIV counseling and testing services
- Counselor's willingness to receive couple HIV counseling and testing services
- Counselor's feelings about whether or not to disclose HIV test result to partner
- Partner's reaction if counselor did disclose and the impact on the relationship

Overhead 2-5

Additional Couple Counseling Skills

- Demonstrate neutrality and non-biased concern for both members of the couple.
- Convey respect for the couple's relationship.
- Facilitate balanced participation of both partners.

Overhead 2-6

Additional Couple Counseling Skills (Continued)

- Model appropriate listening and communication skills.
- Facilitate dialogue between the couple.
- Raise the difficult issues that the couple may need to address.
- Ease tension and diffuse blame.

Overhead 2-7

Forming an Alliance between the Counselor and Couple

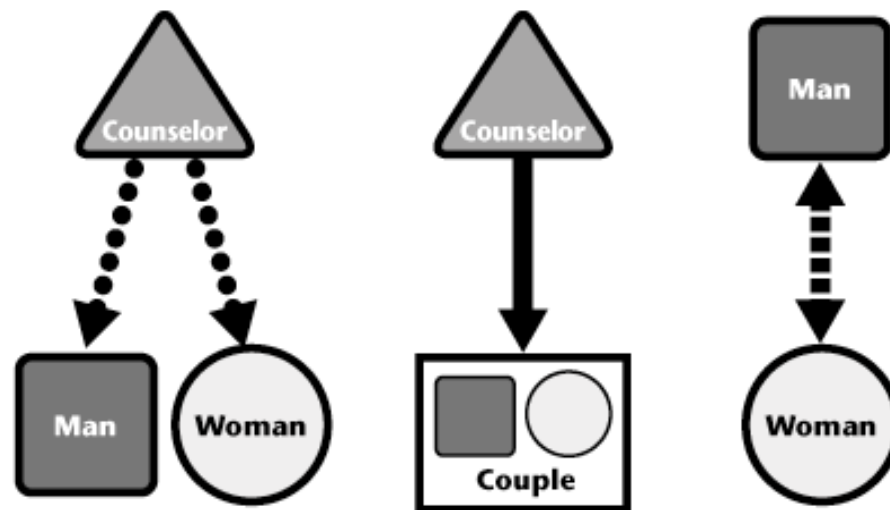
A.C.E.

- 1) Acknowledgment
- 2) Competence
- 3) Empathy

Overhead 2-8

Overhead 2-9

Essential Alliances in Couple Counseling

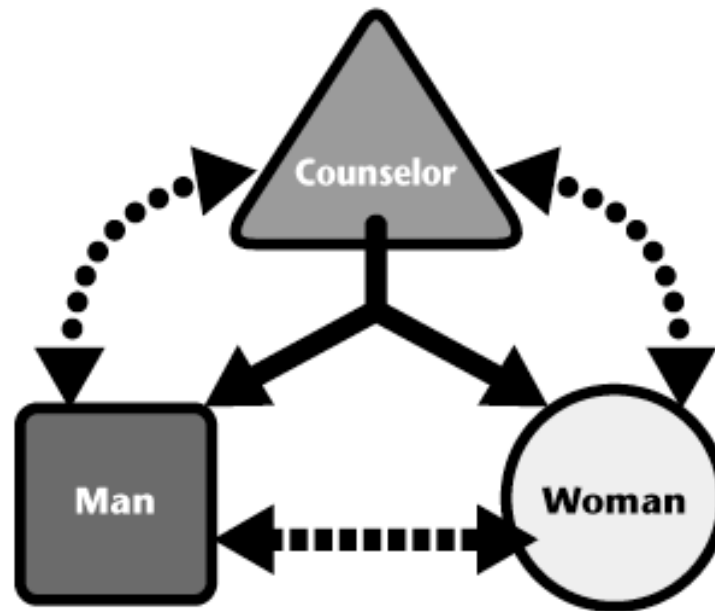


**Forming an alliance is
as much of an attitude
as it is a technique.**

Overhead 2-10

Overhead 2-11

Directing Communication in Couple Counseling



Mediation Skills for Easing Tension and Diffusing Blame

- 1) Normalize feelings, reactions, and experiences.
- 2) Effectively use silence while conveying a supportive and calm demeanor.
- 3) Remind the couple that HIV infection is common.

Overhead 2-12

Mediation Skills for Easing Tension and Diffusing Blame (Continued)

- 4) Focus on the present and future. The past cannot be changed.
- 5) Avoid and deflect questions aimed at identifying the source of infection.
- 6) Express confidence in the couple's ability to deal with HIV-related issues.

Overhead 2-13

Mediation Skills for Easing Tension and Diffusing Blame (Continued)

- 7) Admire the couple's willingness to contend with the challenges of HIV in their lives.
- 8) Acknowledge the feelings expressed or observed. Predict that in time their intensity will likely change and shift.
- 9) Redirect and reframe questions and discussions that are blaming or potentially hostile. Identify underlying non-hostile feelings, such as fear or anxiety.

Overhead 2-14

Mediation Skills for Easing Tension and Diffusing Blame (Continued)

- 10) Calmly and gently name and acknowledge the behavior being observed
- 11) Remind the couple of their roles and responsibilities outlined at the beginning of the CHCT session.

Overhead 2-15

A Solution-Focused Model for Couple HIV Counseling

- Effectively delivered, brief couple interventions make a difference.
- Couples who volunteer for CHCT are invested in the process.
- It is the couple's present and future that are the most important.
- It is most effective to build on strengths rather than weaknesses.

Overhead 2-16

A Solution-Focused Model for Couple HIV Counseling (Continued)

- Focus on solutions instead of dwelling on problems.
- The couple understands how to use their strengths to address HIV-related issues in their relationship.
- The counselor validates feelings, but the focus is on positive actions.
- Small behavior changes can lead to bigger ones.

Overhead 2-17